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Atty. Dkt. No. 039153-0223 (E0554)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Yu

Title: MOS TRANSISTOR WITH
ASYMMETRICAL
SOURCE/DRAIN EXTENSIONS

Appl. No.: 09/476,961

Filing Date: 01/03/2000

Examiner: Warren, M.

Art Unit: 2815

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, Washington, D.C. 20231, on the date below.	
Fay A. LaClair	(Printed Name)
	(Signature)
July 24, 2002	(Date of Deposit)

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**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES**

Box AF
Commissioner for Patents
Washington, D.C. 20231

Sir:

Applicant hereby appeals to the Board of Patent Appeals from the decision of the final rejection dated April 24, 2002, and the Advisory Action dated July 10, 2002, of the Examiner finally rejecting Claims 18-37.

- ☐ Applicant claims small entity status.
- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:
- ☒ Notice of Appeal Fee
- ☒ To be paid as detailed below
- ☐ Not required (Fee paid in prior appeal)

07/31/2002 CNGUYEN 00000071 09476961

01 FC:119

320.00 OP

The required fees are calculated below:

<input checked="" type="checkbox"/>	Notice of Appeal Fee	\$320.00
<input type="checkbox"/>	Extension month:	\$0.00
<input type="checkbox"/>	Extension:	\$0.00
	FEE TOTAL:	\$320.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):	\$0.00
	TOTAL FEE:	\$320.00

- ☐ Please charge Deposit Account No. 06-1447 in the amount of \$320.00 . A duplicate copy of this transmittal is enclosed.
- ☒ A check in the amount of \$320.00 is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

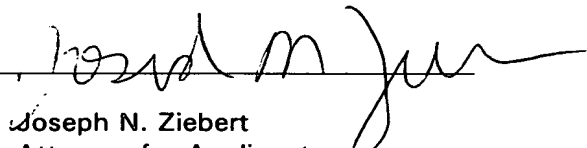
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 7-24-02

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By


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